

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

Democratic Executive Committee of Florida

ADDRESS (number and street)

214 South Bronough Street

☐Check if different  
than previously  
reported. (ACC)

Tallahassee

FL

32302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00005561

3. IS THIS  
REPORT☐NEW  
(N)**OR**☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☒

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

02

01

2006

through

02

28

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Rudy Parker

Signature of Treasurer

Electronically Filed by Rudy Parker

Date

08

11

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Democratic Executive Committee of Florida

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		118135.33
(b) Cash on Hand at Beginning of Reporting Period .....	107045.70	
(c) Total Receipts (from Line 19) .....	92696.91	135801.80
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	199742.61	253937.13
7. Total Disbursements (from Line 31) .....	139135.43	193329.95
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	60607.18	60607.18
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	161404.65	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

Democratic Executive Committee of Florida

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	2	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	2	2	8	2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	35988.70	35988.70
(i) Itemized (use Schedule A) .....	9730.56	10010.56
(ii) Unitemized .....	45719.26	45999.26
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	1818.70	1818.70
(b) Political Party Committees .....	200.00	1700.00
(c) Other Political Committees (such as PACs) .....	47737.96	49517.96
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡		
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	124.40	124.40
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	191.53	421.99
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	44643.02	85737.45
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	44643.02	85737.45
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	92696.91	135801.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	48053.89	50064.35

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	38022.89	49117.71
(i) Federal Share.....		
(ii) Non-Federal Share.....	96721.54	138486.07
(b) Other Federal Operating Expenditures.....	10.00	845.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	134754.43	188448.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	4381.00	4881.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	4381.00	4881.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	139135.43	193329.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	42413.89	54843.88

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	47737.96	49517.96
34. Total Contribution Refunds (from Line 28(d)) .....	4381.00	4881.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	43356.96	44636.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	38032.89	49962.88
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	124.40	124.40
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	37908.49	49838.48

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** Sheet Metal Workers' International Association PAL

Mailing Address 1750 New York Avenue, NW

City State Zip Code  
 Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Sheet Metal Workers' International Ass

Occupation  
PAC

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 1 / 2 0 0 6

Transaction ID: 11ai-000063583

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** Pasco DEC

Mailing Address 5623 Us Highway 19

City State Zip Code  
 New Port Richey FL 34652-3700

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Pasco DEC

Occupation  
Party Committee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.39

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 1 / 2 0 0 6

Transaction ID: 11ai-000063604

Amount of Each Receipt this Period

237.39

Full Name (Last, First, Middle Initial)

**C.** Robert Beckwith

Mailing Address Beckwith Electric Co. Inc.  
 6190 118th Avenue

City State Zip Code  
 Largo FL 33773-3724

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Beckwith Electric Co. Inc.

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063748

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

5637.39

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Celeste C. Bush Mailing Address 412 Farmers Market Road City State Zip Code Fort Pierce FL 34982 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self-Employed/ St. Lucie DEC Occupation Business Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 11ai-000063865 Amount of Each Receipt this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) Evelyn Elliott Presley Mailing Address 3393 Dumaine Court City State Zip Code Clearwater FL 33761 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Retired Occupation Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> 11ai-000063867 Amount of Each Receipt this Period 800.00
<b>C.</b> Full Name (Last, First, Middle Initial) Rachna Choudhry Mailing Address 1773 Long Bow Lane City State Zip Code Clearwater FL 33764 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Self Employed Occupation Physician Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> 11ai-000063751 Amount of Each Receipt this Period 300.00

SUBTOTAL of Receipts This Page (optional) .....

2100.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 / 71

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** Adam Diasti

Mailing Address 822 S Bayside Drive

City State Zip Code  
Tampa FL 33606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Coast Dental Svc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 0 / 2 0 0 6

Transaction ID: 11ai-000063769

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.** Richard M. Lobo

Mailing Address P.O. Box 4033  
1300 N Boulevard

City State Zip Code  
Tampa FL 33607-5645

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
WEDU

Occupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 0 6

Transaction ID: 11ai-000063806

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Kevin X. Crowley

Mailing Address 3184 Hawks Landing Drive

City State Zip Code  
Tallahassee FL 32309

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
PENNINGTON MOORE

Occupation  
attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 0 6

Transaction ID: 11ai-000063807

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

4250.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial)  
Carolyn A. Wadlinger

Mailing Address 1901 East Lake Woodlands Parkway

City State Zip Code  
Oldsmar FL 34677

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self-Employed

Occupation

Eskay Music & Health Care Consulting

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063787

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
Phyllis Dorian

Mailing Address 3147 Hyde Park Drive

City State Zip Code  
Clearwater FL 33761

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation

Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063788

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
Robert Charles Brooks

Mailing Address P.O. Box 128

City State Zip Code  
Saint Marks FL 32355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Merrill Lynch

Occupation

Financial Advisor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063789

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 10 / 71

(check only one)

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) Linda C. Cox		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 2573 Noble Drive		<b>Transaction ID:</b> 11ai-000063790
City Tallahassee	State FL	Zip Code 32308-6488
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lewis Longman & Walker	Occupation Attorney & Lobbyist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Bryan M. Desloge		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address Leadership Tallahassee 1213 Miccosukee Road		<b>Transaction ID:</b> 11ai-000063791
City Tallahassee	State FL	Zip Code 32308-5007
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Desloge Home Oxygen & Medical Equipment	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Daniel Fuchs		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 6
Mailing Address 621 Forest Lair		<b>Transaction ID:</b> 11ai-000063792
City Tallahassee	State FL	Zip Code 32312-1740
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 11 / 71

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** Messer, Caparello & Self

Mailing Address 215 S Monroe Street, Suite 701

City State Zip Code  
Tallahassee FL 32302-1876

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Messer, Caparello & Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063794

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** John T. Herndon

Mailing Address 3701 Bobbin Brook West

City State Zip Code  
Tallahassee FL 32312

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Southern Strategy

Occupation  
Strategic Message

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063795

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Bruce A. Minnick, PA

Mailing Address Attorneys At Law  
PO Box 15588

City State Zip Code  
Tallahassee FL 32317-5588

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
The Minnick Law Firm

Occupation  
Attorney at law

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063797

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** Victoria Lynn Weber

Mailing Address PO Box 6526

City State Zip Code  
Tallahassee FL 32314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Steel Hector & Davis LLP

Occupation  
Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063798

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B.** Michele Marie Rehwinkel-Vasilinda

Mailing Address 3018 Brandemere Drive

City State Zip Code  
Tallahassee FL 32312-2438

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Tallahassee Community Col-  
lege

Occupation  
Attorney/ Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063799

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** Samuel Rogers, Jr.

Mailing Address 1741 Marston Place

City State Zip Code  
Tallahassee FL 32308-0923

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Rogers, Atkins, Gunter

Occupation  
Insurance

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063800

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial)

Linda Loomis Shelley

Mailing Address 101 N Monroe Street

City State Zip Code  
Tallahassee FL 32301-1549

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Fowler, White, Boggs, Ban-  
ker, PA

Occupation  
Assistant Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063801

Amount of Each Receipt this Period

250.00

**B.** Full Name (Last, First, Middle Initial)

Clara Jane Smith

Mailing Address 416 Plantation Road

City State Zip Code  
Tallahassee FL 32303-4206

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Landscape/Vineyard Designer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 1 / 2 0 0 6

Transaction ID: 11ai-000063802

Amount of Each Receipt this Period

250.00

**C.** Full Name (Last, First, Middle Initial)

Rosemarie Totaro

Mailing Address 2227 Donato Drive

City State Zip Code  
Bellaire Beach FL 34635

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Unemployed

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063817

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

900.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** Tina Jones

Mailing Address 1745 North Boulevard

City State Zip Code  
Tampa FL 33612

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Owner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063818

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** Helen Gordon Davis

Mailing Address 45 Adalia Avenue

City State Zip Code  
Tampa FL 33606-3301

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063826

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.** Katie Nichols

Mailing Address 1682 Oceanview Drive

City State Zip Code  
Saint Petersburg FL 33715-2500

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Rummel Group

Occupation  
Investments

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063827

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

2300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)

Louis Cheffy

Mailing Address 1300 Misty Pines Circle

City State Zip Code  
 Naples FL 34105

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.06

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063831

Amount of Each Receipt this Period

200.06

B. Full Name (Last, First, Middle Initial)

T. Janee Murphy

Mailing Address 16907 Candeleda De Avila

City State Zip Code  
 Tampa FL 33613

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Hillsborough DEC

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 6 / 2 0 0 6

Transaction ID: 11ai-000063835

Amount of Each Receipt this Period

275.00

C. Full Name (Last, First, Middle Initial)

Russell Patterson

Mailing Address 6030 River Trace Street

City State Zip Code  
 Tampa FL 33617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063872

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

1475.06

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

A. Sarah T. Jordan-Holmes

Mailing Address 3825 Henderson Blvd, Suite 402

City State Zip Code  
 Tampa FL 33629-5012

FEC ID number of contributing federal political committee.

C

Name of Employer  
Prevent Blindness FloridaOccupation  
President and Chief Executive Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063875

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Pat A. Frank

Mailing Address 3106 W. Prospect Raod

City State Zip Code  
 Tampa FL 33629

FEC ID number of contributing federal political committee.

C

Name of Employer  
Hillsborough CountyOccupation  
Clerk of the Court

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063876

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Lorna T. Gregory

Mailing Address 3009 West Villa Rosa Park

City State Zip Code  
 Tampa FL 33611

FEC ID number of contributing federal political committee.

C

Name of Employer  
UnemployedOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063877

Amount of Each Receipt this Period

900.00

SUBTOTAL of Receipts This Page (optional) .....

1900.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

A. Albert A. Fox, Jr.

Mailing Address 3425 W. Kirby Street

City State Zip Code  
Tampa FL 33606

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance For Responsible  
Cuba Policy Fo

Occupation  
Account Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063878

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jason Busto

Mailing Address 1702 Street Louis

City State Zip Code  
Tampa FL 33607

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Busto Plumberry

Occupation  
Self Employed

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063879

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Harry M. Cohen

Mailing Address 2611 Bayshore Blvd.  
#1203

City State Zip Code  
Tampa FL 33629

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063880

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

3000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** John C. Bierley

Mailing Address Smith Clark Delesie Bierley Muelle  
PO Box 2939

City State Zip Code  
Tampa FL 33601

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Smith Clark Delesie Bier-  
ley Mueller &

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063881

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.** Adam Diasti

Mailing Address 822 S Bayside Drive

City State Zip Code  
Tampa FL 33606

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Coast Dental Svc.

Occupation  
President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063882

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** Michael J. Trentalange

Mailing Address 2506 Mystic Point Way

City State Zip Code  
Tampa FL 33611

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Trentalange & Kelley

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063883

Amount of Each Receipt this Period

2000.00

**SUBTOTAL** of Receipts This Page (optional) .....

6000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

A. John Paul Austin

Mailing Address 255 Evernia Street  
#805City State Zip Code  
West Palm Beach FL 33401FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self EmployedOccupation  
Financial Services

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063884

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Sandra W. Freedman

Mailing Address 3435 Bayshore Blvd, Apt. 700

City State Zip Code  
Tampa FL 33629-8827FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063885

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Velva W. Clark

Mailing Address 1715 North Westshore Blvd

City State Zip Code  
Tampa FL 33607FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UnemployedOccupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 11ai-000063886

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 71

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

<b>A.</b> Full Name (Last, First, Middle Initial) L. Callaghan		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6
Mailing Address 254 2nd Avenue, North		<b>Transaction ID:</b> 11ai-000063909
City Safety Harbor	State FL	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Indian River DEC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address PO Box 651241		<b>Transaction ID:</b> 11ai-000063928
City Vero Beach	State FL	Amount of Each Receipt this Period 226.25
FEC ID number of contributing federal political committee. C		
Name of Employer Indian River DEC	Occupation Party Executive Committee	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.25	

<b>C.</b> Full Name (Last, First, Middle Initial) Dale M. Swope		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 777 S Harbour Island Blvd, Suite 8		<b>Transaction ID:</b> 11ai-000063932
City Tampa	State FL	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		
Name of Employer Swope Law Group	Occupation Attorney	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1100.00	

**SUBTOTAL** of Receipts This Page (optional) .....

1326.25

**TOTAL** This Period (last page this line number only) .....

35988.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 71

(check only one)

☐ 11a ☒ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial)  
Charlotte County Democratic Executive Committee

Mailing Address 163 Harbor Blvd

City State Zip Code  
Fort Charlotte FL 33952

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.14

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 3 / 2 0 0 6

Transaction ID: 11b-000063927

Amount of Each Receipt this Period

305.14

**B.** Full Name (Last, First, Middle Initial)  
Pinellas County Democratic Executive Committee

Mailing Address 2250 1st Avenue N

City State Zip Code  
St. Petersburg FL 33713

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1513.56

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 3 / 2 0 0 6

Transaction ID: 11b-000063929

Amount of Each Receipt this Period

1513.56

Disbursement of Federal  
Funds

**SUBTOTAL** of Receipts This Page (optional) .....

1818.70

**TOTAL** This Period (last page this line number only) .....

1818.70

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 71

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

A. Full Name (Last, First, Middle Initial)  
Christine Jennings For Congress 2006

Mailing Address PO Box 49135

City State Zip Code  
 Sarasota FL 34230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 3 / 2 0 0 6

Transaction ID: 11c-000063931

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) .....

200.00

TOTAL This Period (last page this line number only) .....

200.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 71

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial)

Federal Express

Mailing Address PO Box 94515

City State Zip Code  
 Palatine IL 60094-4515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

13.06

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 1 / 2 0 0 6

Transaction ID: 15-20-00273-00534

Amount of Each Receipt this Period

13.06

Shipping Refund

**B.** Full Name (Last, First, Middle Initial)

U.S. Postal Service - Tallahassee

Mailing Address 2800 S. Adams Street

City State Zip Code  
 Tallahassee FL 32301-9998

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

111.34

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 1 7 / 2 0 0 6

Transaction ID: 15-20-00305-00677

Amount of Each Receipt this Period

111.34

Postage Refund

**SUBTOTAL** of Receipts This Page (optional) .....

124.40

**TOTAL** This Period (last page this line number only) .....

124.40

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 71

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.**

Full Name (Last, First, Middle Initial)

Capital City Bank

Mailing Address 2111 N. Monroe Street

City

Tallahassee

State

FL

Zip Code

32303

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

421.99

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 8 / 2 0 0 6

Transaction ID: 17-20-00330-00598

Amount of Each Receipt this Period

191.53

Interest

**SUBTOTAL** of Receipts This Page (optional) .....

191.53

**TOTAL** This Period (last page this line number only) .....

191.53



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 71

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** State of Florida

Mailing Address Room 316 R.A. Gray Building  
500 South Bronough Street

City Tallahassee State FL Zip Code 32399

Purpose of Disbursement  
Voter File

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 21b-20-00362-00648

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	0	6

Amount of Each Disbursement this Period

10.00									
-------	--	--	--	--	--	--	--	--	--

**SUBTOTAL** of Disbursements This Page (optional) .....

**10.00**

**TOTAL** This Period (last page this line number only) .....

**10.00**

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 71

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☒ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

Full Name (Last, First, Middle Initial)

**A.** T. Janee Murphy

Mailing Address 16907 Candeleda De Avila

City Tampa State FL Zip Code 33613

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 28a-20-00322-00590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

**B.** Blannie Whelan

Mailing Address 275 Bayshore Boulevard  
#1108

City Tampa State FL Zip Code 33606

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 28a-20-00351-00634

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** Richard Lobo

Mailing Address 3139 Bayshore Road

City Sarasota State FL Zip Code 34234

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** 28a-20-00352-00635

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2375.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 71

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial)  
Kathy Richter

Mailing Address 2008 Tanglewood Way, NE

City State Zip Code  
St. Petersburg FL 33702

Purpose of Disbursement  
Refund

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** 28a-20-00353-00636

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2006.00

**SUBTOTAL** of Disbursements This Page (optional) .....

2006.00

**TOTAL** This Period (last page this line number only) .....

4381.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 28 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)  
Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADT

Nature of Debt (Purpose):  
Security

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000002

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADT

Nature of Debt (Purpose):  
Security

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

60.19

Transaction ID: 10-000064

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.19

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADT

Nature of Debt (Purpose):  
Security

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

60.19

Transaction ID: 10-000106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.19

1) **SUBTOTALS** This Period This Page (optional).....

120.38

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 29 / 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADTNature of Debt (Purpose):  
Security Services

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

60.19

Transaction ID: 10-000112

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.19

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADTNature of Debt (Purpose):  
Security

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

60.19

Transaction ID: 10-000150

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.19

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ADTNature of Debt (Purpose):  
Security

Mailing Address P. O. BOX 9001076

City State ZIP Code  
Louisville KY 40290-1076

Outstanding Balance Beginning This Period

60.19

Transaction ID: 10-000165

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

60.19

**1) SUBTOTALS** This Period This Page (optional).....

180.57

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 30 / 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Allied Protection Services, Inc.Nature of Debt (Purpose):  
Security Services

Mailing Address PO Box 7259

City State ZIP Code  
Ft. Myers FL 33911

Outstanding Balance Beginning This Period

706.20

Transaction ID: 10-000133

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

706.20

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
American ExpressNature of Debt (Purpose):  
Contribution Refund

Mailing Address P.O. Box 360002

City State ZIP Code  
Fort Lauderdale FL 33336-0002

Outstanding Balance Beginning This Period

12092.59

Transaction ID: 10-000134

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

12092.59

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Business Equipment SolutionsNature of Debt (Purpose):  
Copier

Mailing Address 3120 N. Davis Hwy - PO Box 9435

City State ZIP Code  
Pensacola FL 32513

Outstanding Balance Beginning This Period

408.44

Transaction ID: 10-000130

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

408.44

**1) SUBTOTALS** This Period This Page (optional).....

13207.23

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Capelouto Terminte & Pest Control, IncNature of Debt (Purpose):  
Pest Control

Mailing Address 700 Capital Circle NE

City State ZIP Code  
Tallahassee FL 32301

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000196

Amount Incurred This Period

162.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

162.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carr, Riggs, & IngramNature of Debt (Purpose):  
Audit

Mailing Address 1713 Mahan Drive

City State ZIP Code  
Tallahassee FL 32308

Outstanding Balance Beginning This Period

5000.00

Transaction ID: 10-000005

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carr, Riggs, & IngramNature of Debt (Purpose):  
Audit

Mailing Address 1713 Mahan Drive

City State ZIP Code  
Tallahassee FL 32308

Outstanding Balance Beginning This Period

18438.97

Transaction ID: 10-000032

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

18438.97

**1) SUBTOTALS** This Period This Page (optional).....

23600.97

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 32 / 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Carr, Riggs, & IngramNature of Debt (Purpose):  
Audit

Mailing Address 1713 Mahan Drive

City State ZIP Code  
Tallahassee FL 32308

Outstanding Balance Beginning This Period

5276.84

Transaction ID: 10-000050

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5276.84

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Center for Independent LivingNature of Debt (Purpose):  
Interpreting Services

Mailing Address 720 N. Denning Drive

City State ZIP Code  
Winter Park FL 32789

Outstanding Balance Beginning This Period

1080.00

Transaction ID: 10-000181

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1080.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
City of TallahasseeNature of Debt (Purpose):  
Utilities

Mailing Address 600 North Monroe Street

City State ZIP Code  
Tallahassee FL 32301-1262

Outstanding Balance Beginning This Period

1443.56

Transaction ID: 10-000186

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1443.56

**1) SUBTOTALS** This Period This Page (optional).....

7800.40

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 33 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Comcast

 Nature of Debt (Purpose):  
Cable

Mailing Address PO Box 530098

 City State ZIP Code  
 Atlanta GA 30353-0098

Outstanding Balance Beginning This Period

100.85

Transaction ID: 10-000175

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.85

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ElectroNet

 Nature of Debt (Purpose):  
Website Hosting

Mailing Address 3411 Capital Medical Boulevard

 City State ZIP Code  
 Tallahassee FL 32308

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000153

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
ElectroNet

 Nature of Debt (Purpose):  
Internet

Mailing Address 3411 Capital Medical Boulevard

 City State ZIP Code  
 Tallahassee FL 32308

Outstanding Balance Beginning This Period

155.00

Transaction ID: 10-000183

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

155.00

1) **SUBTOTALS** This Period This Page (optional).....

255.85

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 34 / 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Florida Business Information, Inc.Nature of Debt (Purpose):  
Newsposting Service

Mailing Address PO Box 193

City State ZIP Code  
Bell FL 32619

Outstanding Balance Beginning This Period

945.00

Transaction ID: 10-000083

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

945.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lora M HaggardNature of Debt (Purpose):  
Consulting Fees

Mailing Address 29 Briarwood Drive

City State ZIP Code  
Ringgold GA 30736

Outstanding Balance Beginning This Period

5000.00

Transaction ID: 10-000184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lora M HaggardNature of Debt (Purpose):  
Travel Reimbursement

Mailing Address 29 Briarwood Drive

City State ZIP Code  
Ringgold GA 30736

Outstanding Balance Beginning This Period

3083.45

Transaction ID: 10-000185

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3083.45

**1) SUBTOTALS** This Period This Page (optional).....

9028.45

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 35 / 71

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hasler Mailing Systems and SolutionsNature of Debt (Purpose):  
Equipment Rental

Mailing Address 19 Forest Parkway

City State ZIP Code  
Shelton CT 06484-0903

Outstanding Balance Beginning This Period

189.74

Transaction ID: 10-000192

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

189.74

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lanier Worldwide, Inc.Nature of Debt (Purpose):  
Copier Lease

Mailing Address P. O. BOX 105533

City State ZIP Code  
Atlanta GA 30348-5533

Outstanding Balance Beginning This Period

1623.75

Transaction ID: 10-000176

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1623.75

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Lanier Worldwide, Inc.Nature of Debt (Purpose):  
Copier Supplies

Mailing Address P. O. BOX 105533

City State ZIP Code  
Atlanta GA 30348-5533

Outstanding Balance Beginning This Period

305.45

Transaction ID: 10-000199

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

305.45

**1) SUBTOTALS** This Period This Page (optional).....

2118.94

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 36 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

457.00

Transaction ID: 10-000015

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

457.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

457.00

Transaction ID: 10-000039

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

457.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

457.00

Transaction ID: 10-000040

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

457.00

1) **SUBTOTALS** This Period This Page (optional).....

1371.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

397.00

Transaction ID: 10-000072

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

397.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

397.00

Transaction ID: 10-000073

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

397.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

397.00

Transaction ID: 10-000074

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

397.00

1) **SUBTOTALS** This Period This Page (optional).....

1191.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

457.00

Transaction ID: 10-000075

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

457.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LexisNexis

 Nature of Debt (Purpose):  
Research

Mailing Address PO Box 7247-7090

 City State ZIP Code  
 Philadelphia PA 19170-7090

Outstanding Balance Beginning This Period

457.00

Transaction ID: 10-000076

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

457.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LobbyTools, Inc.

 Nature of Debt (Purpose):  
Subscription

Mailing Address 522 East Park Avenue

 City State ZIP Code  
 Tallahassee FL 32301

Outstanding Balance Beginning This Period

2600.00

Transaction ID: 10-000057

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2600.00

1) **SUBTOTALS** This Period This Page (optional).....

3514.00

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 39 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 LobbyTools, Inc.

 Nature of Debt (Purpose):  
 Interest

Mailing Address 522 East Park Avenue

 City State ZIP Code  
 Tallahassee FL 32301

Outstanding Balance Beginning This Period

117.00

Transaction ID: 10-000086

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

117.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 LobbyTools, Inc.

 Nature of Debt (Purpose):  
 Interest

Mailing Address 522 East Park Avenue

 City State ZIP Code  
 Tallahassee FL 32301

Outstanding Balance Beginning This Period

66.00

Transaction ID: 10-000117

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

66.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Moreson Conferencing, Inc.

 Nature of Debt (Purpose):  
 Telephone

Mailing Address 39131 Treasury Center

 City State ZIP Code  
 Chicago IL 60694-9100

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000187

Amount Incurred This Period

659.49

Payment This Period

0.00

Outstanding Balance at Close of This Period

659.49

1) **SUBTOTALS** This Period This Page (optional).....

842.49

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 40 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Moreson Conferencing, Inc.

 Nature of Debt (Purpose):  
 Telephone

Mailing Address 39131 Treasury Center

 City State ZIP Code  
 Chicago IL 60694-9100

Outstanding Balance Beginning This Period

107.16

Transaction ID: 10-000193

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

107.16

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Rudy Parker

 Nature of Debt (Purpose):  
 Travel Reimbursement

Mailing Address 440 Rudolph Parker Lane

 City State ZIP Code  
 Perry FL 32347

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000188

Amount Incurred This Period

1153.78

Payment This Period

0.00

Outstanding Balance at Close of This Period

1153.78

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Patton Technologies, LLC

 Nature of Debt (Purpose):  
 Software Maintenance

Mailing Address 2333 Alexandria Drive

 City State ZIP Code  
 Lexington KY 40504

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000194

Amount Incurred This Period

2000.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2000.00

1) **SUBTOTALS** This Period This Page (optional).....

3260.94

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Premiere ConferencingNature of Debt (Purpose):  
Telephone

Mailing Address P.O. Box 87-5450

City State ZIP Code  
Kansas City MO 64187-5450

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000204

Amount Incurred This Period

356.18

Payment This Period

0.00

Outstanding Balance at Close of This Period

356.18

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Production Resource GroupNature of Debt (Purpose):  
Audio Visual/Conference

Mailing Address 1902 Cypress Lake Drive

City State ZIP Code  
Orlando FL 32837

Outstanding Balance Beginning This Period

47100.00

Transaction ID: 10-000166

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

47100.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Service Office SupplyNature of Debt (Purpose):  
Office Supplies

Mailing Address P.O. Box 15038

City State ZIP Code  
Tallahassee FL 32317-5038

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000157

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

47456.18

**2) TOTALS** This Period (last page this line number only).....**3) TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....**4) ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Service Office Supply

 Nature of Debt (Purpose):  
 Office Supplies

Mailing Address P.O. Box 15038

 City State ZIP Code  
 Tallahassee FL 32317-5038

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000189

Amount Incurred This Period

696.51

Payment This Period

0.00

Outstanding Balance at Close of This Period

696.51

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Service Plus, Inc.

 Nature of Debt (Purpose):  
 Copier

Mailing Address PO Box 4197

 City State ZIP Code  
 Tallahassee FL 32315

Outstanding Balance Beginning This Period

988.98

Transaction ID: 10-000129

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

988.98

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Sprint

 Nature of Debt (Purpose):  
 Phone

Mailing Address P. O. Box 96031

 City State ZIP Code  
 Charlotte NC 28296-0031

Outstanding Balance Beginning This Period

14.08

Transaction ID: 10-000097

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14.08

1) **SUBTOTALS** This Period This Page (optional).....

1699.57

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sprint

 Nature of Debt (Purpose):  
Phone

Mailing Address P. O. Box 96031

 City State ZIP Code  
 Charlotte NC 28296-0031

Outstanding Balance Beginning This Period

328.31

Transaction ID: 10-000123

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

328.31

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sprint

 Nature of Debt (Purpose):  
Telephone

Mailing Address P. O. Box 96031

 City State ZIP Code  
 Charlotte NC 28296-0031

Outstanding Balance Beginning This Period

622.10

Transaction ID: 10-000177

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.10

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Sprint

 Nature of Debt (Purpose):  
Telephone

Mailing Address P. O. Box 96031

 City State ZIP Code  
 Charlotte NC 28296-0031

Outstanding Balance Beginning This Period

622.10

Transaction ID: 10-000190

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

622.10

1) **SUBTOTALS** This Period This Page (optional).....

1572.51

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 44 / 71

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 The Westin Diplomat Hotel

 Nature of Debt (Purpose):  
 Catering

Mailing Address 3555 South Ocean Drive

 City State ZIP Code  
 Hollywood FL 33019

Outstanding Balance Beginning This Period

51605.42

Transaction ID: 10-000071

Amount Incurred This Period

0.00

Payment This Period

11000.00

Outstanding Balance at Close of This Period

40605.42

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Voter Activation Network

 Nature of Debt (Purpose):  
 Voter File Hosting

Mailing Address 54 Regents Street

 City State ZIP Code  
 Cambridge MA 02140

Outstanding Balance Beginning This Period

5250.00

Transaction ID: 10-000178

Amount Incurred This Period

0.00

Payment This Period

5250.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 Voter Activation Network

 Nature of Debt (Purpose):  
 Voter File Maintenance

Mailing Address 54 Regents Street

 City State ZIP Code  
 Cambridge MA 02140

Outstanding Balance Beginning This Period

0.00

Transaction ID: 10-000191

Amount Incurred This Period

3578.75

Payment This Period

0.00

Outstanding Balance at Close of This Period

3578.75

1) **SUBTOTALS** This Period This Page (optional).....

44184.17

2) **TOTALS** This Period (last page this line number only).....

161404.65

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

**SCHEDULE H2 (FEC Form 3X)****ALLOCATION RATIOS**

PAGE 45 / 71

NAME OF COMMITTEE (In Full)

**Democratic Executive Committee of Florida****RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.**

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.  
**For PACs Only** : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>JJ 2005/06/01</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>19.00</div> %	<b>NONFEDERAL %</b> <div>81.00</div> %  <b>Transaction ID:</b> H2-0006
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>Conference 2005/12/10</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input type="checkbox"/> New <input type="checkbox"/> Revised <input checked="" type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>9.00</div> %	<b>NONFEDERAL %</b> <div>91.00</div> %  <b>Transaction ID:</b> H2-0007
<b>ACTIVITY OR EVENT IDENTIFIER</b> <b>HRC Event 2006/02/25</b> <hr/> <b>ACTIVITY IS:</b> <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Direct Candidate Support <b>CHECK IF THE RATIO IS:</b> <input checked="" type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Same as Previously Reported	<b>FEDERAL %</b> <div>60.00</div> %	<b>NONFEDERAL %</b> <div>40.00</div> %  <b>Transaction ID:</b> H2-0009

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 46 / 71  
 FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

NAME OF ACCOUNT  
 FDP NonFederal 3

DATE OF RECEIPT

M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 6

TOTAL AMOUNT TRANSFERRED

44643.02

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

42643.02

Transaction ID: H318a-20-00311

ii) Generic Voter Drive .....

Transaction ID:

iii) Exempt Activities .....

Transaction ID:

iv) Direct Fundraising (List Activity or Event Identifier)

a) HRC Event 2006/02/-  
25

2000.00

Transaction ID: H318a-20-00311-00578

b)

Transaction ID:

c) Total Amount Transferred for Direct Fundraising .....

2000.00

v) Direct Candidate Support (List of Activity or Event Identifier)

a)

Transaction ID:

b)

Transaction ID:

c) Total Amount Transferred For Direct Candidate Support .....

vi) Public Communications Referring Only to Party (Made by PAC)

Transaction ID:

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

42643.02

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

2000.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred) .....

44643.02

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Jefferson Pilot Insurance

Mailing Address

P.O. Box 0821

City	State	Zip Code
Carol Stream	IL	60132

Purpose of Disbursement:  
 Insurance

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

52583.81

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00269-00528

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1.74

6.53

8.27

**B. Full Name (Last, First, Middle Initial)**  
 Hampton, Ryan

Mailing Address

17094 Collins Ave. #510

City	State	Zip Code
Miami	FL	33160

Purpose of Disbursement:  
 See Memo Items

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

53055.21

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00270-0003

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

98.99

372.41

471.40

**C. Full Name (Last, First, Middle Initial)**  
 Delta Airlines

Mailing Address

Hartsfield-Jackson Atlanta International Airport

City	State	Zip Code
Atlanta	GA	30320

Purpose of Disbursement:  
 Air Travel

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	2

 / 

D	D
0	1

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00270-00529

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

98.99

372.41

471.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

100.73

378.94

479.67

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 48 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
City of Tallahassee

Mailing Address

600 North Monroe Street

City	State	Zip Code
Tallahassee	FL	32301-1262

Purpose of Disbursement:  
UtilitiesCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

54315.01

Date 02 / 02 / 2006

Transaction ID: 21a-20-00271-00530

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.56		995.24		1259.80

**B. Full Name (Last, First, Middle Initial)**  
Anagram Corporation

Mailing Address

310 West Jefferson St.

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
RentCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

61840.01

Date 02 / 07 / 2006

Transaction ID: 21a-20-00274-00535

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1580.25		5944.75		7525.00

**C. Full Name (Last, First, Middle Initial)**  
U.S. Postmaster

Mailing Address

Colee Station 1404 East Las Olas Blvd

City	State	Zip Code
Ft Lauderdale	FL	33303

Purpose of Disbursement:  
PostageCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

62840.01

Date 02 / 07 / 2006

Transaction ID: 21a-20-00276-00537

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2054.81		7729.99		9784.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 49 / 71  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
Hampton, Ryan

Mailing Address

17094 Collins Ave. #510

City	State	Zip Code
Miami	FL	33160

Purpose of Disbursement:  
Auto Travel

Category/  
Type

Activity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

63296.01

Date 

M	M
0	2

 / 

D	D
0	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00275-00536

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
95.76		360.24		456.00

**B. Full Name (Last, First, Middle Initial)**  
Coletta & Company

Mailing Address

41 Union Avenue

City	State	Zip Code
Memphis	TN	38103

Purpose of Disbursement:  
Consulting/Fundraising

Category/  
Type

Activity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68296.01

Date 

M	M
0	2

 / 

D	D
0	9

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00289-00551

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1050.00		3950.00		5000.00

**C. Full Name (Last, First, Middle Initial)**  
Everest National Insurance Company

Mailing Address

P.O. Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

Purpose of Disbursement:  
Insurance

Category/  
Type

Activity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68412.40

Date 

M	M
0	2

 / 

D	D
1	4

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00278-00539

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.44		91.95		116.39

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1170.20		4402.19		5572.39

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Everest National Insurance Company

Mailing Address

P.O. Box 917807

City	State	Zip Code
Orlando	FL	32891-7807

Purpose of Disbursement:  
InsuranceCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68523.75

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	6

Transaction ID: 21a-20-00279-00540

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

23.38

87.97

111.35

**B. Full Name (Last, First, Middle Initial)**  
 Woodward, John R

Mailing Address

812 Elizabeth Drive

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
See Memo ItemsCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

68543.74

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	6

Transaction ID: 21a-20-00281-0003

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.79

19.99

**C. Full Name (Last, First, Middle Initial)**  
 Yahoo

Mailing Address

701 First Avenue

City	State	Zip Code
Sunnyvale	CA	94089

Purpose of Disbursement:  
InternetCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	6

Transaction ID: 21a-20-00281-00542

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

4.20

15.79

19.99

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

27.58

103.76

131.34

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 51 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**

Miller Reporting

## Mailing Address

1885 North Prairie Dunes Court

City State Zip Code

Oviedo

FL

32765

## Purpose of Disbursement:

Consulting Fees/Administrative

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

69426.94

Date M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: 21a-20-00282-00543

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

185.47

697.73

883.20

**B. Full Name (Last, First, Middle Initial)**

Coletta &amp; Company

## Mailing Address

41 Union Avenue

City State Zip Code

Memphis

TN

38103

## Purpose of Disbursement:

Consulting/Fundraising

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74426.94

Date M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: 21a-20-00290-00552

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1050.00

3950.00

5000.00

**C. Full Name (Last, First, Middle Initial)**

Capital City Bank

## Mailing Address

2111 N. Monroe Street

City State Zip Code

Tallahassee

FL

32303

## Purpose of Disbursement:

Bank Fees

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

74481.94

Date M M / D D / Y Y Y Y  
0 2 / 1 4 / 2 0 0 6

Transaction ID: 21a-20-00291-00553

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

11.55

43.45

55.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1247.02

4691.18

5938.20

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 52 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Time + Plus Payroll Services

Mailing Address

3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:  
 See Memo Items

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

91417.19

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	6

Transaction ID: 21a-20-00343-0003

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3556.40

13378.85

16935.25

**B. Full Name (Last, First, Middle Initial)**  
 Baucham, Lavone

Mailing Address

P.O. Box 1758

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	6

Transaction ID: 21a-20-00343-00614

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

287.74

1082.47

1370.21

**C. Full Name (Last, First, Middle Initial)**  
 Herron, Nora

Mailing Address

503 North Ride

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	6

Transaction ID: 21a-20-00343-00615

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

296.41

1115.05

1411.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

3556.40

13378.85

16935.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 53 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**

Morgan, Anne

Mailing Address

741 West Keller Street

City State Zip Code

Hernando FL 34442

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00343-00616

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

449.10

1689.45

2138.55

**B. Full Name (Last, First, Middle Initial)**

Navarro, Luis A.

Mailing Address

929 Alachua Drive

City State Zip Code

Tallahassee FL 32308

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00343-00617

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1161.29

4368.67

5529.96

**C. Full Name (Last, First, Middle Initial)**

Thurman, Karen L.

Mailing Address

9067 SW 190th Avenue Road

City State Zip Code

Dunnellon FL 34432

Purpose of Disbursement:  
SalaryCategory/  
TypeActivity or Event Identifier:  
Administrative 2005/2006**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date M M / D D / Y Y Y Y  
0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00343-00618

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

665.87

2504.92

3170.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 54 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**

Wiggins, Dirk

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

## Mailing Address

c/o Florida Democratic Party P.O. Box 1758

City State Zip Code

Tallahassee FL 32302

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00343-00619

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

509.00

1914.83

2423.83

**B. Full Name (Last, First, Middle Initial)**

Woodward, John R

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

## Mailing Address

812 Elizabeth Drive

City State Zip Code

Tallahassee FL 32303

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00343-00620

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

186.99

703.46

890.45

**C. Full Name (Last, First, Middle Initial)**

Zervigon, Mario F.

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92521.14

## Mailing Address

600 Victory Garden Drive, Apt. N11

City State Zip Code

Tallahassee FL 32301

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 1 5 / 2 0 0 6

Transaction ID: 21a-20-00344-00621

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

231.83

872.12

1103.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

231.83

872.12

1103.95

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 55 / 71  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Time + Plus Payroll Services

Mailing Address

3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:  
 Payroll Service

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

92582.08

Date 

M	M
0	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00345-00622

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

12.80

48.14

60.94

**B. Full Name (Last, First, Middle Initial)**  
 Time + Plus Payroll Services

Mailing Address

3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:  
 Payroll Tax

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

100570.79

Date 

M	M
0	2

 / 

D	D
1	5

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00302-00565

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1677.63

6311.08

7988.71

**C. Full Name (Last, First, Middle Initial)**  
 Kincaid, Trevor H

Mailing Address

132-1 Dixie Drive

City	State	Zip Code
Tallahassee	FL	32304

Purpose of Disbursement:  
 See Memo Items

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

101069.21

Date 

M	M
0	2

 / 

D	D
1	6

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00300-0003

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

104.67

393.75

498.42

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1795.10

6752.97

8548.07

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

 PAGE 56 / 71  
FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
Walt Disney Parks and Resorts

Mailing Address

1000 West Buena Vista Drive 220 Celebration Place

 City State Zip Code  
Lake Buena Vista FL 32830

 Purpose of Disbursement:  
Lodging
Category/  
Type
 Activity or Event Identifier:  
Administrative 2005/2006  
**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

 Date M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 21a-20-00300-00563

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

104.67

393.75

498.42

**B. Full Name (Last, First, Middle Initial)**  
Osmond Johnson Janitorial Service

Mailing Address

24131 Lake Talquin Drive

 City State Zip Code  
Tallahassee FL 32310

 Purpose of Disbursement:  
Janitorial
Category/  
Type
 Activity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

101569.21

 Date M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 0 6

Transaction ID: 21a-20-00301-00564

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

105.00

395.00

500.00

**C. Full Name (Last, First, Middle Initial)**  
University Center Club

Mailing Address

Doak Campbell Stadium 1 Champions Way

 City State Zip Code  
Tallahassee FL 32306

 Purpose of Disbursement:  
Site Rental
Category/  
Type
 Activity or Event Identifier:  
Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102169.21

 Date M M / D D / Y Y Y Y  
0 2 / 1 7 / 2 0 0 6

Transaction ID: 21a-20-00303-00566

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

126.00

474.00

600.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

231.00

869.00

1100.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT



# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 57 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Sylvester Management Corporation

Mailing Address

P. O. Box 986

City State Zip Code  
 Tallahassee FL 29063

Purpose of Disbursement:  
 Dues/Subscriptions/Publications

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

102959.21

Date M M / D D / Y Y Y Y  
 0 2 / 2 1 / 2 0 0 6

Transaction ID: 21a-20-00304-00567

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

165.90

624.10

790.00

**B. Full Name (Last, First, Middle Initial)**  
 Epic Orlando LLC

Mailing Address

639 E. Colonial Dr Suite 201

City State Zip Code  
 Orlando FL 32803

Purpose of Disbursement:  
 Rent

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

107959.21

Date M M / D D / Y Y Y Y  
 0 2 / 2 2 / 2 0 0 6

Transaction ID: 21a-20-00314-00582

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1050.00

3950.00

5000.00

**C. Full Name (Last, First, Middle Initial)**  
 Coletta & Company

Mailing Address

41 Union Avenue

City State Zip Code  
 Memphis TN 38103

Purpose of Disbursement:  
 Consulting/Fundraising

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

114959.21

Date M M / D D / Y Y Y Y  
 0 2 / 2 3 / 2 0 0 6

Transaction ID: 21a-20-00313-00581

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

1470.00

5530.00

7000.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT

2685.90

10104.10

12790.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 58 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Blue Cross Blue Shield of Florida

Mailing Address

P.O. Box 44144

City	State	Zip Code
Jacksonville	FL	32231-4144

Purpose of Disbursement:  
 Insurance

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117117.64

Date 

M	M
0	2

 / 

D	D
2	3

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00316-00584

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

453.27

1705.16

2158.43

**B. Full Name (Last, First, Middle Initial)**  
 Authorize.Net

Mailing Address

915 South 500 East, Suite 200

City	State	Zip Code
American Fork	UT	84003

Purpose of Disbursement:  
 Bank Fees

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117306.64

Date 

M	M
0	2

 / 

D	D
2	4

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00324-00592

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

39.69

149.31

189.00

**C. Full Name (Last, First, Middle Initial)**  
 Sprint

Mailing Address

P. O. Box 96031

City	State	Zip Code
Charlotte	NC	28296-0031

Purpose of Disbursement:  
 Telephone

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

117886.00

Date 

M	M
0	2

 / 

D	D
2	7

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00317-00585

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

121.67

457.69

579.36

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

614.63

2312.16

2926.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 59 / 71  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 DeltaCom

Mailing Address

P.O. Box 740597

City	State	Zip Code
Atlanta	GA	30374-0597

Purpose of Disbursement:  
 Telephone

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118295.33

Date 02 / 27 / 2006

Transaction ID: 21a-20-00318-00586

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.96		323.37		409.33

**B. Full Name (Last, First, Middle Initial)**  
 Woodward, John R

Mailing Address

812 Elizabeth Drive

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
 See Memo Items

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

118376.33

Date 02 / 27 / 2006

Transaction ID: 21a-20-00319-0003

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.01		63.99		81.00

**C. Full Name (Last, First, Middle Initial)**  
 WebDomains4u.com

Mailing Address

Computech Internet Services P.O. Box 11772

City	State	Zip Code
Jacksonville	FL	32239

Purpose of Disbursement:  
 Internet

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 02 / 27 / 2006

Transaction ID: 21a-20-00319-00587

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.01		63.99		81.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
102.97		387.36		490.33

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 60 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Time + Plus Payroll Services

Mailing Address

3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:  
 See Memo Items

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

135311.58

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00335-0003

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3556.40

13378.85

16935.25

**B. Full Name (Last, First, Middle Initial)**  
 Baucham, Lavone

Mailing Address

P.O. Box 1758

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00335-00605

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

287.74

1082.47

1370.21

**C. Full Name (Last, First, Middle Initial)**  
 Herron, Nora

Mailing Address

503 North Ride

City	State	Zip Code
Tallahassee	FL	32303

Purpose of Disbursement:  
 Salary

Category/  
Type

Activity or Event Identifier:  
 Administrative 2005/2006

**[MEMO ITEM]**

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00335-00625

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

296.41

1115.05

1411.46

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3556.40

13378.85

16935.25

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 61 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**

Morgan, Anne

Mailing Address

741 West Keller Street

City

State

Zip Code

Hernando

FL

34442

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 2 8 / 2 0 0 6

Transaction ID: 21a-20-00335-00626

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

449.10

1689.45

2138.55

**B. Full Name (Last, First, Middle Initial)**

Navarro, Luis A.

Mailing Address

929 Alachua Drive

City

State

Zip Code

Tallahassee

FL

32308

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 2 8 / 2 0 0 6

Transaction ID: 21a-20-00335-00627

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1161.29

4368.67

5529.96

**C. Full Name (Last, First, Middle Initial)**

Thurman, Karen L.

Mailing Address

9067 SW 190th Avenue Road

City

State

Zip Code

Dunnellon

FL

34432

Purpose of Disbursement:

Salary

Category/  
Type

Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date  M  M /  D  D /  Y  Y  Y  Y

0 2 / 2 8 / 2 0 0 6

Transaction ID: 21a-20-00335-00628

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

665.87

2504.92

3170.79

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

0.00

0.00

0.00

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 62 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**

Wiggins, Dirk

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

## Mailing Address

c/o Florida Democratic Party P.O. Box 1758

City State Zip Code

Tallahassee FL 32302

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**Date  M  M /  D  D /  Y  Y  Y  Y

02

28

2006

Transaction ID: 21a-20-00335-00629

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

509.00

1914.83

2423.83

**B. Full Name (Last, First, Middle Initial)**

Woodward, John R

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

## Mailing Address

812 Elizabeth Drive

City State Zip Code

Tallahassee FL 32303

## Purpose of Disbursement:

Salary

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

**[MEMO ITEM]**Date  M  M /  D  D /  Y  Y  Y  Y

02

28

2006

Transaction ID: 21a-20-00335-00630

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

186.99

703.46

890.45

**C. Full Name (Last, First, Middle Initial)**

Time + Plus Payroll Services

## Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt☐ Voter Drive ☐ Direct Candidate Support☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

143275.06

## Mailing Address

3210 Lisa Court

City State Zip Code

Tallahassee FL 32312

## Purpose of Disbursement:

Payroll Tax

Category/  
Type

## Activity or Event Identifier:

Administrative 2005/2006

Date  M  M /  D  D /  Y  Y  Y  Y

02

28

2006

Transaction ID: 21a-20-00336-00606

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1672.33

6291.15

7963.48

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1672.33

6291.15

7963.48

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 63 / 71  
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Zervigon, Mario F.

Mailing Address

600 Victory Garden Drive, Apt. N11

City	State	Zip Code
Tallahassee	FL	32301

Purpose of Disbursement:  
 Salary

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

144379.01

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00346-00623

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
231.83		872.12		1103.95

**B. Full Name (Last, First, Middle Initial)**  
 Time + Plus Payroll Services

Mailing Address

3210 Lisa Court

City	State	Zip Code
Tallahassee	FL	32312

Purpose of Disbursement:  
 Payroll Service

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

144439.95

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00347-00624

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.80		48.14		60.94

**C. Full Name (Last, First, Middle Initial)**  
 Carlson Wagonlit Travel

Mailing Address

1535 Killearn Center Boulevard

City	State	Zip Code
Tallahassee	FL	32309

Purpose of Disbursement:  
 Air Travel

Category/Type

Activity or Event Identifier:  
 Administrative 2005/2006

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

144847.14

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00326-00594

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
85.51		321.68		407.19

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
330.14		1241.94		1572.08

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

# **SCHEDULE H4 (FEC Form 3X)** **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
 Carlson Wagonlit Travel

Mailing Address

1535 Killearn Center Boulevard

City	State	Zip Code
Tallahassee	FL	32309

Purpose of Disbursement:  
 Air Travel

Category/  
Type

Activity or Event Identifier:  
 Conference 2005/12/10

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

549.70

Date 

M	M
0	2

 / 

D	D
2	8

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00325-00593

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

49.47

500.23

549.70

**B. Full Name (Last, First, Middle Initial)**  
 Wyndham Westshore Hotel

Mailing Address

4860 West Kennedy Boulevard

City	State	Zip Code
Tampa	FL	33609

Purpose of Disbursement:  
 Site Rental

Category/  
Type

Activity or Event Identifier:  
 HRC Event 2006/02/25

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

5000.00

Date 

M	M
0	2

 / 

D	D
1	4

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00286-00547

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

3000.00

2000.00

5000.00

**C. Full Name (Last, First, Middle Initial)**  
 W2005 Wyn Hotels, LLP

Mailing Address

4860 West Kennedy Boulevard

City	State	Zip Code
Tampa	FL	33609-2524

Purpose of Disbursement:  
 Site Rental

Category/  
Type

Activity or Event Identifier:  
 HRC Event 2006/02/25

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

17500.00

Date 

M	M
0	2

 / 

D	D
2	2

 / 

Y	Y	Y	Y
2	0	0	6

Transaction ID: 21a-20-00315-00583

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

7500.00

5000.00

12500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

10549.47

7500.23

18049.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT



**SCHEDULE H4 (FEC Form 3X)  
DISBURSEMENT FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 65 / 71

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Democratic Executive Committee of Florida

**A. Full Name (Last, First, Middle Initial)**  
W2005 Wyn Hotels, LLP

Mailing Address

4860 West Kennedy Boulevard

City	State	Zip Code
Tampa	FL	33609-2524

Purpose of Disbursement:  
Site RentalCategory/  
TypeActivity or Event Identifier:  
HRC Event 2006/02/25

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

25673.13

Date 02 / 24 / 2006

Transaction ID: 21a-20-00323-00591

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4903.88		3269.25		8173.13

**B. Full Name (Last, First, Middle Initial)**  
The Westin Diplomat Hotel

Mailing Address

3555 South Ocean Drive

City	State	Zip Code
Hollywood	FL	33019

Purpose of Disbursement:  
Site RentalCategory/  
TypeActivity or Event Identifier:  
JJ 2005/06/01

Type of Allocated Activity:

☐ Administrative ☒ Fundraising ☐ Exempt  
☐ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

11283.81

Date 02 / 23 / 2006

Transaction ID: 21a-20-00328-00596

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2090.00		8910.00		11000.00

**C. Full Name (Last, First, Middle Initial)**  
Voter Activation Network

Mailing Address

54 Regents Street

City	State	Zip Code
Cambridge	MA	02140

Purpose of Disbursement:  
Voter File HostingCategory/  
TypeActivity or Event Identifier:  
Voter Drive 2005/2006

Type of Allocated Activity:

☐ Administrative ☐ Fundraising ☐ Exempt  
☒ Voter Drive ☐ Direct Candidate Support  
☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

5250.00

Date 02 / 14 / 2006

Transaction ID: 21a-20-00280-00541

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1102.50		4147.50		5250.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
8096.38		16326.75		24423.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38022.89		96721.54		134744.43

Image# 26950407971

Form/Schedule: **SA15**      The Non Federal % of this allocable refund was transfered on 4.28.06. Please see the May Monthly report for the disclosure.  
Transaction ID: **15-20-00273-00534**

Form/Schedule: **H4**      This expenditure was not made in connection or on behalf of a specifically identified federal candidate.  
Transaction ID: **21a-20-00286-00547**

\*\*\*\*\*

**Image# 26950407972**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00289-00551**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00290-00552**

\*\*\*\*\*

Image# 26950407973

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00303-00566**

Form/Schedule: **SA15** The Non Federal % of this allocable refund was transfered on 4.28.06. Please see the May Monthly report for the disclosure.

Transaction ID: **15-20-00305-00677**

\*\*\*\*\*

**Image# 26950407974**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00313-00581**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00315-00583**

\*\*\*\*\*

**Image# 26950407975**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00323-00591**

Form/Schedule: **H4** This expenditure was not made in connection or on behalf of a specifically identified federal candidate.

Transaction ID: **21a-20-00328-00596**

\*\*\*\*\*

Image# 26950407976

Form/Schedule: **SA11ai** Disbursement of Federal Funds

Transaction ID: **11ai-000063604**

Form/Schedule: **F3XA** No employee spent more than 25% of their compensated time on Federal related activities.

Transaction ID:

\*\*\*\*\*